

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: cursive;">10/509,202</div>	Filing Date
							Applicant(s)	
<div style="font-size: 1.5em; font-family: cursive; transform: rotate(-15deg); display: inline-block;">9/23/4</div>							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1							
2		1						
3								
4	1							
5	1							
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Total Indep	5		4					
Total Depend	2		0					
Total Claims	7		4					
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